Case 15-83204 Doc 1 Filed 12/31/15 Entered 12/31/15 17:31:13 Desc Main Document Page 1 of 84

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	 Check if this an amended filing

B 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

t 1: Identify Yourself				
	About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):	
Your full name				
Write the name that is on	Shawn		Mary	
your government-issued picture identification (for	First name		First name	
example, your driver's	Jason		Elizabeth	
ilicerise or passport).	Middle name		Middle name	
Bring your picture	Chavis		Chavis	
meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)	
All other names you have used in the last 8 years			FKA Mary Elizabeth Long	
Include your married or maiden names.			•	
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3099		xxx-xx-3306	
	Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Chavis Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number About Debtor 1: Shawn First name Chavis Last name and Suffix (Sr., Jr., II, III)	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Chavis Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number XXX-XX-3099	

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Debtor 1 Shawn Jason Chavis
Debtor 2 Mary Elizabeth Chavis

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and	■ I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s)
	doing business as names	- FINI-	- FINI-
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		5338 Pebble Lane Loves Park, IL 61111	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Winnebago County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 **Shawn Jason Chavis** Debtor 2 **Mary Elizabeth Chavis** Case number (if known) Tell the Court About Your Bankruptcy Case 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay П The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When District Case number When Case number District When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When Case number, if known District Do you rent your Go to line 12. □ No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

bankruptcy petition.

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Den	wary Elizabeth Ch	iavis			Case Hullibel (# known)
Par	Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of bus	siness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	oer, Street, City, Sta	ate & ZIP Code
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Rea	I Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as c	defined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadline	s. If you ir is, cash-f	ndicate that you are low statement, and	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am ı	not filing under Cha	pter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or An	ny Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	Number, Street, City, State & Zip Code

Shawn Jason Chavis

Debtor 1

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Debtor 1 Shawn Jason Chavis
Debtor 2 Mary Elizabeth Chavis Case number (if known)

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

П

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or

making rational decisions about finances.

about illiance

Disability. My physical disability causes me to be unable to participate

in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active

military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

☐ Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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	tor 2 Mary Elizabeth Ch			Case nu	umber (if known)				
Par	6: Answer These Quest	ions for Rep	orting Purposes						
16.	What kind of debts do you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
			b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			No. Go to line 16c.						
			Yes. Go to line 17.						
		16c. S	tate the type of debts you owe th	nat are not consumer debts or bu	usiness debts				
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chapter 7. G	o to line 18.					
Do you estimate that after any exempt property is excluded and	e	xpenses are paid that funds will l		t property is excluded and administrative cured creditors?					
	administrative expenses are paid that funds will] No						
be available for distribution to unsecured creditors?			l Yes						
18.	How many Creditors do	1 -49		□ 1,000-5,000	2 5,001-50,000				
	you estimate that you owe?	□ 50-99		☐ 5001-10,000 ☐ 40,004.05.000	□ 50,001-100,000				
	□ 1 □ 2			10,001-25,000	☐ More than100,000				
19.	How much do you	\$0 - \$50	.000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion				
	estimate your assets to be worth?	□ \$50,001	- \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion				
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 millior	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
20.	How much do you	□ \$0 - \$50	,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?	\$50,001		□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion				
		\$100,001 - \$500,000 \$500,001 - \$1 million		□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$10,000,000,001 - \$50 billion □ More than \$50 billion				
Par	7: Sign Below								
For	you	I have exam	nined this petition, and I declare	under penalty of perjury that the	information provided is true and correct.				
					gible, under Chapter 7, 11,12, or 13 of title 11, d I choose to proceed under Chapter 7.				
			ey represents me and I did not pa have obtained and read the not		is not an attorney to help me fill out this b).				
		I request re	lief in accordance with the chapte	er of title 11, United States Code	e, specified in this petition.				
		I understand bankruptcy 1519, and 3	case can result in fines up to \$25	cealing property, or obtaining mo 50,000, or imprisonment for up to	oney or property by fraud in connection with a to 20 years, or both. 18 U.S.C. §§ 152, 1341,				
		/s/ Shawn	Jason Chavis		zabeth Chavis				
		Shawn Ja Signature o	son Chavis f Debtor 1	Mary Elizab Signature of D					
		Executed or	December 31, 2015 MM / DD / YYYY	Executed on	December 31, 2015 MM / DD / YYYY				

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Debtor 1 Shawn Jason Charlestor 2 Mary Elizabeth Cl			Page 7 of 84	se number (if known)
•	attorney, if you are ed by one	, , , , , , , , , , , , , , , , , , , ,	ed States Code, and have	e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. §
If you are not represented by an attorney, you do not need to file this page.		342(b) and, in a case in which § 707(b)(4)(D) in the schedules filed with the petition is incor		no knowledge after an inquiry that the information
		/s/ Daniel A. Springer Signature of Attorney for Debtor	Date	December 31, 2015

6314059Bar number & State

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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this an amended filing

B 101

Voluntary Petition for Individuals Filing for Bankruptcy

MM / DD / YYYY

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 7:	Sign Below				<u> </u>			
For you		I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12 United States Code. I understand the relief available under each chapter, and I choose to proceed under						
	!	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
	I	l request relief	, specified in this petition.					
	ļ	oney or property by fraud in connection with a p 20 years, or both. 18 U.S.C. §§ 152, 1341,						
	_	10	<u> </u>	<u>TV[ay Elizab</u> Mary Elizab	galon CC			
		Shawn Jaso Signature of D		Signature of D				
		Executed on	December 19, 2015	Executed on	December 19, 2015			

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Debtor 1 Shawn Jason Cha Debtor 2 Mary Elizabeth Cl		Case	e number (if known)
For your attorney, if you are represented by one if you are not represented by an attorney, you do not need	under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify	ed States Code, and have e that I have delivered to the applies, certify that I have r	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § so knowledge after an inquiry that the information
to file this page.	Signature of Attorney for Debtor	Date	December 19, 2015 MM / DD / YYYY
	Daniel A. Springer		
	Springer Law Firm		
	2222 E State St Suite 107 Rockford, IL 61104		
	Number, Street, City, State & ZIP Code Contact phone 815.312.4725	Email address	dspringerlaw@gmail.com
	6314059 Bar number & State		

ill in this info	rmation to identify your	case:			
Debtor 1	Shawn Jason Cha				
eptot i	First Name	Middle Name	Last Name		
ebtor 2	Mary Elizabeth Cl	havis			
couse if, filing)	First Name	Middle Name	Last Name		
nited States B	Sankruptcy Court for the:	NORTHERN DISTRI	CT OF ILLINOIS		
ase number					
known)				☐ Check if to amended	
two married ou must file to	people are filing togethe	er, both are equally res file bankruptcy sched in connection with a b	sponsible for supplying correct in ules or amended schedules. Makin pankruptcy case can result in fines	formation.	oroperty, or t for up to 20
	gn Below				
Did you p	pay or agree to pay some	eone who is NOT an a	ttorney to help you fill out bankru	ptcy forms?	
■ No					
☐ Yes.	Name of person		. Attach Ba and Signa	ankruptcy Petition Preparer's Notice ture (Official Form 119).	, Declaration,
Under per that they					
	nality of perjury, I declare are true and correct. wn Jason Chavis ature of Debtor 1	e that I have read the	x May E0 Mary Elizabeth (Signature of Debto	gels Chi	

Fill in this inform	nation to identify y	our case:				
Debtor 1	Shawn Jason	Chavis				
	First Name	Middle Name		Last Name		
Debtor 2	Mary Elizabet	h Chavis				
(Spouse if, filing)	First Name	Middle Name		Last Name		
United States Ba	nkruptcy Court for t	he: NORTHERN DIS	STRICT	OF ILLINOIS		
Case number						
(if known)		· · · · · · · · · · · · · · · · · · ·			1	Check if this is an amended filing
		·	·			amenaca ming
Official Fo	rm 107					
		Affaire for l	ndivi	duals Filing for Bai	nkruptcy	12/1
Be as complete	and accurate as p	ossible. If two married	people	are filing together, both are e this form. On the top of any	qually responsible to	ror supplying correct
number (if know	nore space is need n). Answer every d	ieu, allacii a separale Iuestion.	Stider N	tills forth, on the top or any	Additional bagoo, m	,
Part 12: Sign	Below				· -	
are true and cor with a bankrupto	rect. I understand	that making a false st in fines up to \$250,00	atement	nd any attachments, and I dec , concealing property, or obta prisonment for up to 20 years,	ining money or pro	of perjury that the answers perty by fraud in connection
. 7		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	AA.	m Elmilel C	ر آب	
Shawn Jason	Charles			Elizabeth Chavis		
Signature of De				ture of Debtor 2		
Olginatale of De			_			
Date Decem	ber 19, 2015	·	Date	December 19, 2015		
Did you attach a ■ No □ Yes	additional pages to	Your Statement of Fi	inancial	Affairs for Individuals Filing fo	or Bankruptcy (Offic	cial Form 107)?
_ /						
	agree to pay some	one who is not an atto	orney to	help you fill out bankruptcy fo	orms?	
■ No			=		10:	440)
Yes. Name of	f Person At	tach the <i>Bankruptcy Pe</i>	tition Pr	eparer's Notice, Declaration, and	i Signature (Oπicial F	·om: 119).

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Fill in this infor	mation to identify your cas	e:	
Debtor 1	Shawn Jason Chavi	s	
Debtor 2 (Spouse, if filing)	Mary Elizabeth Chav	ris	
United States	Bankruptcy Court for the:	Northern District of Illinois	
Case number (if known)	 .		

Check	as directed in lines 17 and 21:
	ording to the calculations required by this tement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
	Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

Shawn Jason Chavis Signature of Debtor 1

Date December 19, 2015

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

MM / DD / YYYY

Mary Elizabeth Chavis

Date December 19, 2015

Signature of Debtor 2

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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1	
Debtor 1 Shawn Jason Chavis	
Debtor 2 Mary Elizabeth Chavis (Spouse, if filing)	
United States Bankruptcy Court for the: Northern District of Illinois	
Case number(if known)	☐ Check if this is an amended filing
Official Form 122C-2 Chapter 13 Calculation of Your Disposable Income	12/15

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

X

Shawn Jason Chavis
Signature of Debtor 1

Date
December 19, 2015

MM / DD / YYYY

Sign Below

X

Mary Elizabeth Chavis
Signature of Debtor 2

Date
December 19, 2015

MM / DD / YYYY

Best Case Bankruptcy

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Shawn Jason Chavis Mary Elizabeth Chavis		Case No.		
11	mary Linzabeth Onlaws	Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPEN				at
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(a compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy	, or agreed to be paid	to me, for services i	rendered or to
	For legal services, I have agreed to accept		and the second s	3,500.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due		\$ <u></u>	3,500.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compe	nsation with any other perso	n unless they are mer	nbers and associates	of my law firm.
	☐ I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name	tion with a person or persons es of the people sharing in th	who are not member ne compensation is at	rs or associates of my tached.	law firm. A
5.	In return for the above-disclosed fee, I have agreed to rer	nder legal service for all aspe	cts of the bankruptcy	case, including:	
	 a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed] Negotiations with secured creditors to representation agreements and application 522(f)(2)(A) for avoidance of liens on hot 	ment of affairs and plan whi rs and confirmation hearing, educe to market value; e ns as needed; preparation	ch may be required; and any adjourned h xemption plannin	earings thereof;	d filing of
6.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.	does not include the followi chargeability actions, ju	ng service: dicial lien avoidar	nces, relief from s	tay actions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	agreement or arrangement f	or payment to me for	representation of the	e debtor(s) in
	December 19, 2015		<u> </u>		
-	Date	Daniel A. Sprin	ger		
		Signature of Attor Springer Law F	ney irm		
		2222 E State St			
		Suite 107			
		Rockford, IL 61	104		
		815.312.4725 dspringerlaw@	omail com		
1		Name of law firm			
					

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United States Bankruptcy Court Northern District of Illinois

In re	Shawn Jason Chavis Mary Elizabeth Chavis		Case No.	
	mary Englands in the same	Debtor(s)	Chapter 13	
	VE	RIFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	62
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credite	ors is true and correct to	the best of my
Date:	December 19, 2015	Shawn Jason Chavis Signature of Debtor	2-2	
Date:	December 19, 2015	Mary Elizabeth Chavis		

Signature of Debtor

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Debtor 1	Shawn Jason Cha	avis		
	First Name	Middle Name	Last Name	
Debtor 2	Mary Elizabeth Cl	navis		
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	inkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	23,730.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	23,730.00
Par	2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	25,906.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	6,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	144,494.39
	Your total liabilities	\$	176,400.39
Pari	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,920.13
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,644.33
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	our other s	schedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a persona	al, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Case number (if known)

Document Page 17 of 84 Shawn Jason Chavis

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

7,230.08

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Tota	al claim
9a. Domestic support obligations (Copy line 6a.)	\$_	6,000.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$	110,505.95
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	116,505.95

Debtor 1

Debtor 2

Mary Elizabeth Chavis

Case 15-83204 Doc 1 Filed 12/31/15 Entered 12/31/15 17:31:13 Desc Main Document Page 18 of 84 Fill in this information to identify your case and this filing: Debtor 1 **Shawn Jason Chavis** Middle Name Last Name First Name Debtor 2 **Mary Elizabeth Chavis** (Spouse, if filing) Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Jeep 3.1 Make: Who has an interest in the property? Check one. the amount of any secured claims on Schedule D: Liberty Model ☐ Debtor 1 only Creditors Who Have Claims Secured by Property. 2002 Debtor 2 only Year: Current value of the Current value of the 127000 ■ Debtor 1 and Debtor 2 only Approximate mileage: entire property? portion you own? Other information: ☐ At least one of the debtors and another \$6.087.00 \$6.087.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Subaru Who has an interest in the property? Check one. 3.2 Make: the amount of any secured claims on Schedule D: **Forester** Model: Debtor 1 only Creditors Who Have Claims Secured by Property. 1999 Year: Debtor 2 only Current value of the

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1 and Debtor 2 only

(see instructions)

☐ At least one of the debtors and another

☐ Check if this is community property

Approximate mileage:

Other information:

127000

\$3,500.00

portion you own?

Current value of the

\$3,500.00

entire property?

Case 15-83204 Doc 1 Filed 12/31/15 Entered 12/31/15 17:31:13 Desc Main Document Page 19 of 84 **Shawn Jason Chavis** Debtor 1 Debtor 2 Mary Elizabeth Chavis Case number (if known) Do not deduct secured claims or exemptions. Put Chrysler 3.3 Make: Who has an interest in the property? Check one. the amount of any secured claims on Schedule D: **Fiat** Model: Debtor 1 only Creditors Who Have Claims Secured by Property. 2013 Year: Debtor 2 only Current value of the Current value of the 36197 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$11.011.00 \$11.011.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$20,598.00 pages you have attached for Part 2. Write that number here......>> **Describe Your Personal and Household Items** Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No ■ Yes. Describe..... Living Room Furniture \$1,500.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... 2 TV's, Computers \$600.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe.....

Official Form 106A/B

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

11. Clothes

Yes. Describe.....

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Debtor 1 Debtor 2	Shawn Jaso Mary Elizabe				Case number (if known)	
		Used (Clothing			\$200.00
□ No			tume jewelry, eng	gagement rings, wedding rings, heirloo	m jewelry, watches, gems,	gold, silver
-	arm animals aples: Dogs, cats,	birds, hor	ses			
■ Yes	. Describe	2 Cats				\$0.00
☐ No	ther personal an		-	id not already list, including any hea	alth aids you did not list	
— 165	. Give specific iiii		Thrower			\$200.00
for F		number i	nere	Part 3, including any entries for pa	ges you have attached	\$2,570.00
ŕ	wn or have any l	egal or ed	quitable interest	in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No				home, in a safe deposit box, and on h	and when you file your peti	tion
– 165					Cash	\$37.00
<i>Exan</i> □ No				eccounts; certificates of deposit; shares nts with the same institution, list each. Institution name:	in credit unions, brokerage	houses, and other similar
		17.1.	Checking	Rock Valley Credit Union	n	\$100.00
		17.2.	Savings	Rock Valley Credit Union	n	\$25.00
	s, mutual funds, nples: Bond funds,			brokerage firms, money market accou	nts	
☐ Yes			Institution or issue	er name:		
	oublicly traded st oint venture	ock and i	nterests in incor	rporated and unincorporated busine	esses, including an intere	st in an LLC, partnership,
	. Give specific inf		about themne of entity:		% of ownership:	

Page 21 of 84 Document **Shawn Jason Chavis** Debtor 1 Debtor 2 Mary Elizabeth Chavis Case number (if known) 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: 401k 401K through Current Employer \$400.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information......

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Official Form 106A/B Schedule A/B: Property page 4

Case 15-83204

Doc 1

Filed 12/31/15

	Case 15-83204 I	Doc 1	Filed 12/31/15 Document	Entered 12/31/15 17:31:13 Page 22 of 84	Desc Main
Debtor 1 Debtor 2	Shawn Jason Chavis Mary Elizabeth Chavis			Case number (if known)	
Exam _i ■ No	benefits; unpaid loans yo	insurance	payments, disability ben someone else	nefits, sick pay, vacation pay, workers' comp	ensation, Social Security
☐ Yes.	Give specific information				
Exam □ No	•			(HSA); credit, homeowner's, or renter's insura	ance
■ Yes.	·	ny name:		Beneficiary:	Surrender or refund value:
			rance Policy through yer (no cash value)	Mary Chavis	\$0.00
somed ■ No □ Yes.	one has died. Give specific information	•		nsurance policy, or are currently entitled to rec	ceive property because
Exam ■ No	ples: Accidents, employment d				
□ No	contingent and unliquidated Describe each claim	claims of	f every nature, includin	ng counterclaims of the debtor and rights	to set off claims
100.	Describe each dam	decide Beth C	ed to discontinue pu	rsation Claim (Debtor 2 has rsuit; Case #14 WC 027452 Mary ebtor 2 is represented by Seidman Chicago, IL)	Unknowr
■ No	nancial assets you did not al Give specific information	ready list			
36. Add			· · · · · · · · · · · · · · · · · · ·	ny entries for pages you have attached	\$562.00
Part 5: De	escribe Any Business-Related Pro	perty You	Own or Have an Interest In	n. List any real estate in Part 1.	
37. Do you	own or have any legal or equitable to Part 6.				
☐ Yes. (Go to line 38.				
	escribe Any Farm- and Commerci you own or have an interest in farml			or Have an Interest In.	
■ No.	Go to Part 7.	quitable ir	nterest in any farm- or	commercial fishing-related property?	
⊔ Yes	s. Go to line 47.				Current value of the

Current value of the portion you own?
Do not deduct secured claims or exemptions.

page 5

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Debt Debt		Document		Case number (if known)	
Part 7	Describe All Property You Own or Have an Inter	est in That You Did Not	List Above		
	Oo you have other property of any kind you d Examples: Season tickets, country club membe No Yes. Give specific information	•			
54.	Add the dollar value of all of your entries from	om Part 7. Write that	number here		\$0.00
Part 8	List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$20,598.00	-	
57.	Part 3: Total personal and household items,	, line 15	\$2,570.00		
58.	Part 4: Total financial assets, line 36	_	\$562.00		
59.	Part 5: Total business-related property, line	45	\$0.00		
60.	Part 6: Total farm- and fishing-related prope	rty, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 5	4 + _	\$0.00		
62.	Total personal property. Add lines 56 through	61	\$23,730.00	Copy personal property total	\$23,730.00
63.	Total of all property on Schedule A/B. Add lin	ne 55 + line 62			\$23,730.00

Official Form 106A/B Schedule A/B: Property

page 6

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			111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Fill in this infor	mation to identify your	case:		
Debtor 1	Shawn Jason Ch	avis		
	First Name	Middle Name	Last Name	
Debtor 2	Mary Elizabeth C	havis		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(ii kilowii)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

 Wł 	ich set of exemptions	are you claiming?	? Check one only,	even if your	spouse is filing	g with you.
------------------------	-----------------------	-------------------	-------------------	--------------	------------------	-------------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Ched	ck only one box for each exemption.	
\$3,500.00		\$2,400.00	735 ILCS 5/12-1001(c)
		any applicable statutory limit	
\$1,500.00		\$1,500.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$600.00		\$600.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$200.00		\$200.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
\$70.00		\$70.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
	\$3,500.00 \$1,500.00 \$200.00	\$3,500.00	\$3,500.00 \$1,500.00 \$1,500.00 \$1,00% of fair market value, up to any applicable statutory limit \$600.00 \$200.00 \$100% of fair market value, up to any applicable statutory limit \$100% of fair market value, up to any applicable statutory limit \$1,00% of fair market value, up to any applicable statutory limit \$200.00 \$200.00 \$200.00 \$200.00 \$200.00 \$200.00 \$200.00 \$200.00 \$300.00 \$200.00 \$200.00 \$300.00

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Shawn Jason Chavis Debtor 1 **Mary Elizabeth Chavis** Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Snow Thrower** 735 ILCS 5/12-1001(b) \$200.00 \$200.00 Line from Schedule A/B: 14.1 100% of fair market value, up to any applicable statutory limit Cash 735 ILCS 5/12-1001(b) \$37.00 \$37.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit **Checking: Rock Valley Credit Union** 735 ILCS 5/12-1001(b) \$100.00 \$100.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Savings: Rock Valley Credit Union 735 ILCS 5/12-1001(b) \$25.00 \$25.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit 401k: 401K through Current 735 ILCS 5/12-1006 \$400.00 100% **Employer** Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Term Life Insurance Policy through 735 ILCS 5/12-1001(h)(3) 100% \$0.00 Current Employer (no cash value) **Beneficiary: Mary Chavis** 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 31.1 **Potential Workers Compensation** 820 ILCS 305/21 100% Unknown Claim (Debtor 2 has decided to discontinue pursuit; Case #14 WC П 100% of fair market value, up to 027452 Mary Beth Chavis v. Sonoco; any applicable statutory limit Debtor 2 is represented by Seidman Margulis & Fairman LLP, Chicago, IL) Line from Schedule A/B: 34.1 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? Nο

Yes

Case 15-83204 Doc 1 Filed 12/31/15 Entered 12/31/15 17:31:13 Desc Main Page 26 of 84 Document Fill in this information to identify your case: Debtor 1 **Shawn Jason Chavis** Middle Name Last Name First Name Debtor 2 Mary Elizabeth Chavis (Spouse if, filing) Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column B Column C Column A 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much Amount of claim Value of collateral Unsecured as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the that supports this portion value of collateral. claim If any 2.1 | Citizens Finance Describe the property that secures the claim: \$9,500.00 \$11,011.00 \$0.00 Creditor's Name 2013 Chrysler Fiat 36197 miles Attn: Bankruptcy Dept. As of the date you file, the claim is: Check all that 6457 N 2nd St apply. Loves Park, IL 61111 □ Contingent Number, Street, City, State & Zip Code ■ Unliquidated ■ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only At least one of the debtors and another Judgment lien from a lawsuit ☐ Check if this claim relates to a ☐ Other (including a right to offset) community debt Date debt was incurred 12/2015 Last 4 digits of account number Georgia Department of 2.2 \$884.00 \$0.00 \$884.00 Describe the property that secures the claim: Revenue Creditor's Name 1800 Century Boulevard As of the date you file, the claim is: Check all that apply

Atlanta, GA 30345 □ Contingent Number, Street, City, State & Zip Code Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. ■ Debtor 1 only An agreement you made (such as mortgage or secured car loan) Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

☐ Check if this claim relates to a community debt

☐ Statutory lien (such as tax lien, mechanic's lien)

Judgment lien from a lawsuit

Tax Lien Other (including a right to offset)

10/2008 Last 4 digits of account number

Date debt was incurred

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Debtor 1 Shawn Jason Chavis		Case number (if know)		
Pirst Name Middle N Debtor 2 Mary Elizabeth Chavis	lame Last Name			
First Name Middle N	lame Last Name			
2.3 Gresty Auto Sales	Describe the property that secures the claim:	\$4,000.00	\$3,500.00	\$500.00
Creditor's Name	1999 Subaru Forester 127000 miles		Ψο,οσοίσο	Ψοσοίσο
	1000 0000000000000000000000000000000000			
	As of the date you file, the claim is: Check all that			
2080 Harlem Road	apply.			
Loves Park, IL 61111	☐ Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or	· secured		
Debtor 2 only	car loan)	oodiou		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)		
lacksquare At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number			
0	B	\$44 F00 00	* C 007 00	¢Ε 40Ε 00
2.4 Santander Consumer Creditor's Name	Describe the property that secures the claim: 2002 Jeep Liberty 127000 miles	\$11,522.00	\$6,087.00	\$5,435.00
Croditor o realito	2002 Jeep Liberty 127000 miles			
8585 N Stemmons Fwy				
Suite 1000	As of the date you file, the claim is: Check all that apply.			
Dallas, TX 75247	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	Disputed			
_	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	 An agreement you made (such as mortgage or car loan) 	secured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit	,		
☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt	,			
Date debt was incurred 9/2013	Last 4 digits of account number			
			_	
	olumn A on this page. Write that number here:	\$25,906.00	<u>)</u>	
If this is the last page of your form, add Write that number here:	the dollar value totals from all pages.	\$25,906.00		
Part 2: List Others to Be Notified 6	or a Dobt That You Already Listed			
	or a Debt That You Already Listed	and almost the listed in Port 4. For any	ammin if a collection of	manay ia 4m in a
	e notified about your bankruptcy for a debt that your someone else, list the creditor in Part 1, and then			
creditor for any of the debts that you listed do not fill out or submit this page.	d in Part 1, list the additional creditors here. If you	u do not have additional persons	to be notified for any	lebts in Part 1,
Name Address				
Equifax	On which	line in Part 1 did you ente	er the creditor?	2.4
PO Box 740256	l oot 4 die	its of account number		
Atlanta, GA 30374	Last 4 dig	jits of account number		
Name Address				
Experian	On which	line in Part 1 did you ente	or the creditor?	
PO Box 4500		-	or the organier:	2.4
Allen, TX 75013	Last 4 dig	its of account number		

Official Form 106D

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Debtor 1	Shawn Jason Ch	avis		Case number (if know)	
	First Name	Middle Name	Last Name		
Debtor 2	Mary Elizabeth C	havis			
	First Name	Middle Name	Last Name		
Tr 55	ame Address ansUnion 5 West Adams Str nicago, IL 60661	eet		On which line in Part 1 did you enter the creditor? Last 4 digits of account number	2.4

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		Document	Page 29 of	84		_			
Fill in this inforn	nation to identify your	case:							
Debtor 1	Shawn Jason Cha	avis							
	First Name	Middle Name	Last Name						
Debtor 2	Mary Elizabeth Cl								
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS						
Case number									
(if known)							_	if this is ded filing	
Official For	m 106E/F								
		Who Have Unsec	ured Claims						12/15
any executory contr Schedule G: Execut D: Creditors Who H: the Continuation Pa number (if known).	acts or unexpired leases to ory Contracts and Unexpi ave Claims Secured by Pr	e Part 1 for creditors with PRIORI that could result in a claim. Also red Leases (Official Form 106G). operty. If more space is needed, e no information to report in a Parasecured Claims	list executory contracts Do not include any crec copy the Part you need,	s on Scl ditors w , fill it ou	hedule A/B: P rith partially se ut, number the	roperty ecured of entries	(Official Form claims that are in the boxes	106A/B) listed in on the le	and on n Schedule eft. Attach
	litors have priority unsecu								
☐ No. Go to		.							
Yes									
identify what possible, list Part 1. If mo	type of claim it is. If a claim the claims in alphabetical or re than one creditor holds a	ims. If a creditor has more than one has both priority and nonpriority ar order according to the creditor's nan particular claim, list the other creditor, see the instructions for this form	nounts, list that claim her ne. If you have more than tors in Part 3.	re and sh n two prid	now both priori	ty and no	onpriority amou	ınts. As m	nuch as
	anaton of outsitype of orall	,, 555 816 8160 850 876 887			l claim	Prior amou	-	Nonpri amoun	•
AL Dept	t. of Human Resourc	Ces Last 4 digits of account	number	\$	6,000.00) _{\$}	6,000.00	\$	\$0.00
50 Riple	editor's Name ey Street	When was the debt incu	ırred?			_		-	
Montgo Number St	mery, AL 36130 reet City State Zlp Code	As of the date you file, t	he claim is: Check all th	hat appl	у				
Who incur	red the debt? Check one.	Continuent							
☐ Debtor		☐ Contingent							
■ Debtor	,	☐ Unliquidated							
☐ Debtor	1 and Debtor 2 only	☐ Disputed							
☐ At least	t one of the debtors and and	other							
☐ Check communit	if this claim is for a	Type of PRIORITY unser	cured claim:						
	n subject to offset?	■ Domestic support obli	gations						
■ No		☐ Taxes and certain other	er debts you owe the gov	ernmen	t				
☐ Yes		Claims for death or pe	ersonal injury while you w	ere intox	ricated				
		Other. Specify	Child Support					_	
			Ja Jakkait						
Part 2: List Al	l of Your NONPRIORIT	Y Unsecured Claims							
3. Do any cred	litors have nonpriority uns	secured claims against you?							
☐ No. You	have nothing to report in this	s part. Submit this form to the court	with your other schedule	es.					

Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

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Debtor 1 Shawn Jason Chavis Debtor 2 Mary Elizabeth Chavis Case number (if know) 4.1 **Americash Loans** 4,658.04 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 184 When was the debt incurred? Des Plaines, IL 60016 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Payday Loan Other. Specify 4.2 **Americash Loans** 720.56 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 184 When was the debt incurred? Des Plaines, IL 60016 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Payday Loan Other. Specify 4.3 **Aspen Dental** 19.00 Last 4 digits of account number Nonpriority Creditor's Name 7310 Walton Street When was the debt incurred? Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply

Entered 12/31/15 17:31:13 Desc Main Case 15-83204 Doc 1 Filed 12/31/15 Page 31 of 84 Document Debtor 1 Shawn Jason Chavis Debtor 2 Mary Elizabeth Chavis Case number (if know) Who incurred the debt? Check one. □ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only □ Disputed ■ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Dental Services** Other. Specify Association of Univ. 4.4 150.00 Radiologists Last 4 digits of account number Nonpriority Creditor's Name 5401 Kingston Pike, Suite 540 When was the debt incurred? Knoxville, TN 37919 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated Disputed ■ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Bills** Other. Specify 4.5 Athens Limestone Hospital 1,481.00 Last 4 digits of account number \$ Nonpriority Creditor's Name 700 Market Street West When was the debt incurred? Athens, AL 35611 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated □ Disputed ■ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt

4.6 **BBY/CBNA**

■ No

☐ Yes

Nonpriority Creditor's Name

PO Box 6497 Sioux Falls, SD 57117

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did

☐ Debts to pension or profit-sharing plans, and other similar debts

Medical Bills

Last 4 digits of account number

When was the debt incurred?

not report as priority claims

Other. Specify

492.70

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Number Street City State Zlp Code	As of the date you file	e, the claim is: Check all that apply		
Who incurred the debt? Check one.	_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
_	_			
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORIT	V uncesured eleim		
At least one of the debtors and another		i unsecureu cialin.		
☐ Check if this claim is for a community debt	☐ Student loans			
Is the claim subject to offset?	Obligations arising not report as priority cla	out of a separation agreement or divorce that you did ims		
■ No	Debts to pension or	profit-sharing plans, and other similar debts		
Yes	Other. Specify	Credit Card Purchases		
Best Choice 123	Last 4 digits of accou	nt number	\$	1,750
Nonpriority Creditor's Name 621 Medicine Way, Suite 6	When was the debt in		·	
Ukiah, CA 95482 Number Street City State Zlp Code	As of the date you file	e, the claim is: Check all that apply		
Who incurred the debt? Check one.		,		
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
_	□ Disputed			
Debtor 1 and Debtor 2 only	Type of NONPRIORIT	V unsecured claim		
At least one of the debtors and another		i unsecureu ciaim.		
☐ Check if this claim is for a community debt	☐ Student loans			
Is the claim subject to offset?	Obligations arising not report as priority cla	out of a separation agreement or divorce that you did nims		
■ No	☐ Debts to pension or	profit-sharing plans, and other similar debts		
Yes	Other. Specify	Payday Loan		
Capital One Auto Finance	Last 4 digits of accou	nt number	\$	15
Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 259407	When was the debt in	curred?		
Plano, TX 75025 Number Street City State Zlp Code	As of the date you file	e, the claim is: Check all that apply		
Who incurred the debt? Check one.	☐ Contingent			
■ Debtor 1 only	Č			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORIT	Y unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising not report as priority cla	out of a separation agreement or divorce that you did		
_		profit-sharing plans, and other similar debts		
■ No	-			
	Other Specify	Auto Deficiency		
■ No □ Yes	Other. Specify	Auto Deficiency		

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	1 Shawn Jason Chavis 2 Mary Elizabeth Chavis	Document Page 33 of 84 Case number (if know)		
	Attn: Bankruptcy Dept PO Box 6492	When was the debt incurred?		
=	Carol Stream, IL 60197 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	☐ Debtor 1 only			
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Debt Owed		
4.10	Capital One Bank USA NA	Last 4 digits of account number	\$	946.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 30281	When was the debt incurred?		
	Salt Lake City, UT 84130 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	_			
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Credit Card Purchases		
4.11	Comcast	Last 4 digits of account number	\$	456.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 3005 Southeastern, PA 19398	When was the debt incurred?	·	

As of the date you file, the claim is: Check all that apply

Number Street City State Zlp Code

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4.14	Comenity Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$	357.83
	Yes	Other. Specify Utilities		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	☐ Check if this claim is for a community debt	☐ Student loans		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 only	_ contingent		
	Who incurred the debt? Check one.	☐ Contingent		
	PO Box 3005 Southeastern, PA 19398 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Nonpriority Creditor's Name Attn: Bankruptcy Dept.	Last 4 digits of account number When was the debt incurred?	\$	003.70
4.13	Comcast		Φ.	609.76
	Yes	Other. Specify Utilities		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	☐ Check if this claim is for a community debt	☐ Student loans		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 only			
	Who incurred the debt? Check one.	☐ Contingent		
	Attn: Bankruptcy Dept. PO Box 3005 Southeastern, PA 19398 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim is: Check all that apply		
	Comcast Nonpriority Creditor's Name	Last 4 digits of account number	\$	39.70
4.12	Compact			39.78
	Yes	Other. Specify Utilities		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	☐ Check if this claim is for a community	☐ Student loans		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	Debtor 2 only	☐ Unliquidated		
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent		
	Who incurred the debt? Cheek one			

Nonphority Creditor's Na

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Debtor	1 Shawn Jason Chavis	Document Page 35 of 84	
	2 Mary Elizabeth Chavis	Case number (if know)	
	Attn: Bankruptcy Dept. PO Box 182789 Columbus, OH 43218	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
4.15	Commonwealth Edison	Last 4 digits of account number	\$ 710.00
	Nonpriority Creditor's Name 3 Lincoln Center Attn: Bankruptcy Group/Claims Dept. Villa Park, IL 60181	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only		
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\hfill \square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Utilities	
4.16	Direct Loan SVC System	Last 4 digits of account number	\$ 7,319.95
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 5609	When was the debt incurred?	
	Greenville, TX 75403 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
		auto jou mo, mo olumi loi ondok all mat apply	

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575 North Broadway	When was the debt in	curred?		
Aurora, IL 60505				
Number Street City State Zlp Code	As of the date you file	s, the claim is: Check all that apply		
Who incurred the debt? Check one.	☐ Contingent			
■ Debtor 1 only				
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORIT	Y unsecured claim:		
☐ Check if this claim is for a community debt	☐ Student loans			
Is the claim subject to offset?	Obligations arising not report as priority cla	out of a separation agreement or divorce that you did aims		
■ No	Debts to pension o	profit-sharing plans, and other similar debts		
Yes	Other. Specify	Credit Extension		

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Center

4.19

Last 4 digits of account number

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Nonpriority Creditor's Name

Ft. Sanders Regional Medical

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Debtor Debtor	1 Shawn Jason Chavis Mary Elizabeth Chavis	Case number (if know)	
	1901 Clinch Avenue Knoxville, TN 37916	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\hfill \square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills	
4.20	Gateway at Knoxville	Last 4 digits of account number	\$ 300.00
	Nonpriority Creditor's Name 301 Lippencott St. Knoxville, TN 37920	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Debt owed	
4.21	GEICO	Last 4 digits of account number	\$ 23.32
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 9105	When was the debt incurred?	
	Macon, GA 31208-9105 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Insurance	

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ebtor 2 Mary Elizabeth Chavis	Case number (if know)					
GEICO	Last 4 digits of account number	\$	79.67			
Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 9105 Macon, GA 31208-9105	Attn: Bankruptcy Dept. When was the debt incurred? PO Box 9105					
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.	☐ Contingent					
Debtor 1 only						
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
No	$\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts					
Yes	Other. Specify Insurance					
3 Heritage Family Medicine	Last 4 digits of account number	\$	150.00			
Nonpriority Creditor's Name 12205 County Line Road, Suite B Madison, AL 35758	When was the debt incurred?	·				
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
■ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community debt	☐ Student loans					
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No	$\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts					
Yes	Other. Specify Medical Bills					
Jostens Inc.	Last 4 digits of account number	\$	371.60			
Nonpriority Creditor's Name 3601 Minnesota Drive, Suite 400 Minneapolis, MN 55435	When was the debt incurred?					
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					

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Nonpriority Creditor's Name		
445 S Gay St.	When was the debt inc	curred?
Knoxville, TN 37902		
Number Street City State Zlp Code	As of the date you file,	the claim is: Check all that apply
Who incurred the debt? Check one.	☐ Contingent	
Debtor 1 only	3	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY	unsecured claim:
☐ Check if this claim is for a community debt	☐ Student loans	
s the claim subject to offset?	Obligations arising o not report as priority clai	ut of a separation agreement or divorce that you did ms
No	Debts to pension or	profit-sharing plans, and other similar debts
☐ Yes	Other. Specify	Utility Debt

Lion Loans

Nonpriority Creditor's Name **P.O. Box 276**

Isabel, SD 57633

4.27

Last 4 digits of account number

When was the debt incurred?

391.22

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Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.			
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
_	_		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:		
☐ At least one of the debtors and another☐ Check if this claim is for a community	<u></u>		
debt	☐ Student loans		
Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
No	\square Debts to pension or profit-sharing plans, and other similar debts		
Yes	■ Other. Specify Payday Loan		
Majestic Lake Financial	Last 4 digits of account number	\$	1,250.0
Nonpriority Creditor's Name 635 East Hwy 20, K	When was the debt incurred?	Ψ	,
Upper Lake, CA 95485 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	☐ Contingent		
■ Debtor 1 only			
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another			
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	Debts to pension or profit-sharing plans, and other similar debts		
Yes	Other. Specify Payday Loan		
Navient	Last 4 digits of account number	\$	87,932.0
Nonpriority Creditor's Name			
PO Box 9635 Wilkes Barre, PA 18773 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim is: Check all that apply		
•			
Who incurred the debt? Check one. Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community debt	Student loans		
Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
_	$\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts		
No			
■ No □ Yes	Other. Specify Student Loans	_	

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Debtor Debtor	1 Shawn Jason Chavis 2 Mary Elizabeth Chavis	Case number (if know)	
	Attn: Bankruptcy Dept. 5510 East State St.	When was the debt incurred?	
=	Rockford, IL 61108-2381 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills	
4.31	Penn Credit Corporation	Last 4 digits of account number	\$ 145.00
	Nonpriority Creditor's Name 916 S. 14th Street	When was the debt incurred?	
	Harrisburg, PA 17104 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only		
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collecting for Creditor	
4.32	Physicians Care PC	Last 4 digits of account number	\$ 51.60
	Nonpriority Creditor's Name 4490 Hixson Pike	When was the debt incurred?	
	Chattanooga, TN 37415 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	_	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills	

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Debtor	2 Mary Elizabeth Chavis	Case number (if know)				
4.33	Progressive Insurance	Last 4 digits of account number	\$	266.00		
	Nonpriority Creditor's Name 6300 Wilson Mills Road Cleveland, OH 44143	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Insurance				
4.34	Radiology of Huntsville PC	Last 4 digits of account number	\$	230.00		
	Nonpriority Creditor's Name 2006 Franklin Street SE, Suite 200	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt					
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Medical Bills				
4.35	Southeast Oral Surgery	Last 4 digits of account number	\$	75.00		
	Nonpriority Creditor's Name 1858 Crest Road	When was the debt incurred?	·			
	Maryville, TN 37804 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				

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4.38 The Rush

Last 4 digits of account number

Nonpriority Creditor's Name

Attn: Bankruptcy Dept. 3001 Knoxville Ctr Dr. Knoxville, TN 37924

When was the debt incurred?

\$ 2,000.00

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Debtor 2 Mary Elizabeth Chavis

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Case number (if know)

Dobto	Wai y Liizabetii Ciiavis			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt			
	Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Debt owed		
4.39	Thomas Pearson	Last 4 digits of account number	\$	2,500.00
	Nonpriority Creditor's Name		· —	
	747 Halifax Ave. Winter Park, FL 32792	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	☐ Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	□Yes	Other. Specify Old Landlord		
4.40	US Dont of Education/AESA			6,293.00
4.40	US Dept. of Education/AFSA Nonpriority Creditor's Name	Last 4 digits of account number	\$	0,293.00
	PO Box 7202 Utica, NY 13504	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	·		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	■ Student loans		
	Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	☐ Other. Specify		
		Student Loans		
4.41	UT Medical Center	Last 4 digits of account number	Ф.	932.00
-	Nonpriority Creditor's Name	Last 4 digits of account number	\$	

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	1 Shawn Jason Chavis 2 Mary Elizabeth Chavis	Case number (if know)		
	1924 Alcoa Highway	When was the debt incurred?		
-	Knoxville, TN 37920 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Medical Bills		
4.42	West Market Emergency Group	Last 4 digits of account number	\$	1,455.00
	Nonpriority Creditor's Name 700 West Market Street Athens, AL 35611	When was the debt incurred?	·	<u> </u>
=	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only			
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Medical Bills		
4.43	Wheaton 121	Last 4 digits of account number	\$	6,500.00
	Nonpriority Creditor's Name 121 N. Cross Street	When was the debt incurred?		
-	Wheaton, IL 60187 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another			
	☐ Check if this claim is for a community debt			
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Back Rent		
4.44	Winfield Radiology Consultants	Last 4 digits of account number	\$	123.00

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Debtor 1 Shawn Jason Chavis Debtor 2 Mary Elizabeth Chavis Case number (if know) Nonpriority Creditor's Name When was the debt incurred? 25 N. Winfield Road Winfield, IL 60190 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ☐ Debtor 1 only Debtor 2 only Unliquidated Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Bills** Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part2 did you list the original creditor? Name and Address **American Coradius International** Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 2420 Sweethome Rd. #150 ■ Part 2: Creditors with Nonpriority Unsecured Claims Buffalo, NY 14228-2244 Last 4 digits of account number On which entry in Part 1 or Part2 did you list the original creditor? Name and Address ATG Credit LLC Line 4.44 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. ■ Part 2: Creditors with Nonpriority Unsecured Claims PO Box 14895 Chicago, IL 60614 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? Capio Partners Line 4.42 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 2222 Texoma Parkway 150 ■ Part 2: Creditors with Nonpriority Unsecured Claims Sherman, TX 75091 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? **Credit Collection Services** Line 4.33 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims PO Box 9134 Needham Heights, MA 02494 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? **Fox Collection Center** Line 4.34 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 454 Moss Trail ■ Part 2: Creditors with Nonpriority Unsecured Claims Goodlettsville, TN 37072 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? Harvard Collection Services Inc. Line 4.42 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims 4839 N. Elston Avenue ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60630 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor?

Entered 12/31/15 17:31:13 Filed 12/31/15 Document Page 47 of 84 Debtor 1 Shawn Jason Chavis Debtor 2 Mary Elizabeth Chavis Case number (if know) **HF Holdings** Line 4.18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 5929 Anno Avenue ■ Part 2: Creditors with Nonpriority Unsecured Claims Orlando, FL 32809 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? Jay K. Levy & Associates Line 4.43 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 155 Revere Drive #2 ■ Part 2: Creditors with Nonpriority Unsecured Claims Northbrook, IL 60062 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? Lourn Long Line 2.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims **811 Castleview Circle** ☐ Part 2: Creditors with Nonpriority Unsecured Claims Jasper, TN 37347 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? One Advantage LLC Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1232 West State Road ■ Part 2: Creditors with Nonpriority Unsecured Claims La Porte, IN 46350 Last 4 digits of account number On which entry in Part 1 or Part2 did you list the original creditor? Name and Address **Revenue Recovery Corporation** Line **4.41** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 50250 ■ Part 2: Creditors with Nonpriority Unsecured Claims Knoxville, TN 37950 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? Revenue Recovery Corporation Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 50250 ■ Part 2: Creditors with Nonpriority Unsecured Claims Knoxville, TN 37950 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? **Revenue Recovery Corporation** Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 50250 ■ Part 2: Creditors with Nonpriority Unsecured Claims Knoxville, TN 37950 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? **Rockford Mercantile Agency** Line 4.30 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. ■ Part 2: Creditors with Nonpriority Unsecured Claims 2502 S Alpine Rd Rockford, IL 61108 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? Line 4.11 of (Check one): Stellar Recovery, Inc. ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. ■ Part 2: Creditors with Nonpriority Unsecured Claims 1327 Highway 2 W, Suite 100 Kalispell, MT 59901 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? Tek Collecting Inc. Line 4.23 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 1269 ■ Part 2: Creditors with Nonpriority Unsecured Claims Columbus, OH 43216 Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

Case 15-83204

Doc 1

Desc Main

^{6.} Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

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Debtor 1 Shawn Jason Chavis
Debtor 2 Mary Elizabeth Chavis

Case number (if know)

				Total claim	
	6a.	Domestic support obligations	6a.	\$	6,000.00
otal claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$	6,000.00
				Total Claim	
	6f.	Student loans	6f.	\$	110,505.95
tal claims					
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	33,988.44
	6j.	Total. Add lines 6f through 6i.	6j.	\$	144,494.39

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		DOM:	1 4400 45 01 04				
Fill in this information to identify your case:							
Debtor 1	Shawn Jason Ch	avis					
	First Name	Middle Name	Last Name	-			
Debtor 2	Mary Elizabeth Cl	havis					
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS				
Case number							
(if known)							

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Progressive Leasing 10619 South Jordan Gateway, Ste 100 South Jordan, UT 84095 Furniture Lease, \$134/month, \$2,794.93 balance, Lessee

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		Docume	ent Page 50 o	of 84
Fill in thi	s information to identify y	our case:		
Debtor 1	Shawn Jason First Name	Middle Name	Last Name	
Debtor 2			Last Hamo	
(Spouse if, fi	Mary Elizabetl First Name	Middle Name	Last Name	
	o ,			
United St	ates Bankruptcy Court for th	ne: NORTHERN DISTRICT	OF ILLINOIS	
Coop num	ah a r			
Case nun	ibei			☐ Check if this is an
,				amended filing
Officia	al Form 106H			
Sche	dule H: Your Co	odeptors		12/15
Codebtor	s are neonle or entities wh	no are also liable for any del	nts you may have Re	as complete and accurate as possible. If two married
people ar	e filing together, both are	equally responsible for sup	plying correct informa	ation. If more space is needed, copy the Additional Page
fill it out,	and number the entries in	the boxes on the left. Attac	h the Additional Page	to this page. On the top of any Additional Pages, write
your name	e and case number (if kno	own). Answer every question	l .	
1 Do	you have any codebtors?	? (If you are filing a joint case,	do not list either snous	e as a codebtor
1. 50	you have any codebiors:	i (ii you are iiiiig a joiiit case,	do not list entrer spous	e as a codebior.
■ No	1			
☐ Ye				
				ory? (Community property states and territories include
Arizo	na, California, Idaho, Louisi	ana, Nevada, New Mexico, Pu	ierto Rico, Texas, Wasl	nington, and Wisconsin.)
■ Na	. Go to line 3.			
`			ith t th - time - 0	
⊔ те	s. Dia your spouse, former	spouse, or legal equivalent liv	e with you at the time?	
				or if your spouse is filing with you. List the person show
				e sure you have listed the creditor on Schedule D (Offic
	i 106D), Schedule E/F (Off it Column 2.	icial Form 106E/F), or Sched	iule G (Official Form 1	06G). Use Schedule D, Schedule E/F, or Schedule G to
00	at Goldmin 2.			
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
	Name, Number, Street, City, State a	and ZIP Code		Check all schedules that apply:
2.1				Cahadula D. lina
3.1	Name			☐ Schedule D, line
				☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street			
	City	State	ZIP Code	
3.2				☐ Schedule D, line
0.2	Name			☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street	Chata	710.0-4-	
	City	State	ZIP Code	

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Fill	in this information	to identify your c	ase.			•			
	otor 1	Shawn Jaso							
	otor 2 buse, if filing)	Mary Elizabe	eth Chavis						
Uni	ted States Bankru	ptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS					
Cas	se number					Check if the	nis is:		
(If kr	nown)			•		☐ An am	ended filir	ng	
						☐ A supp	olement sh	-	petition chapter g date:
0	fficial Form	<u> 106l</u>				MM / I	DD/ YYYY	/	
S	chedule I:	Your Inc	ome						12/15
spo atta	use. If you are se ch a separate she	parated and you	are married and not fili r spouse is not filing w On the top of any additi	ith you, do not includ	e informat	ion about you	ir spouse	e. If more sp	ace is needed,
1.	Fill in your emp information.	loyment		Debtor 1		Dek	otor 2 or r	non-filing sp	oouse
	If you have more		Employment status	■ Employed			Employed		
	attach a separate information about		Employment status	□ Not employed		■ Not e		employed	
	employers.		Occupation	Shift Supervisor					
	Include part-time self-employed we		Employer's name	Valspar					
	Occupation may or homemaker, i		Employer's address	1215 Nelson Bou Rockford, IL 6110					
			How long employed to	here? 13 month	าร				
Par	rt 2: Give De	etails About Mor	nthly Income						
	mate monthly incuse unless you are		ate you file this form. If	you have nothing to re	port for any	v line, write \$0	in the spa	ice. Include y	our non-filing
	ou or your non-filing e space, attach a s		ore than one employer, co this form.	ombine the information	for all emp	oloyers for that	person or	n the lines be	∍low. If you need
						For Debtor		or Debtor 2 on-filing spo	
2.			ry, and commissions (b calculate what the month		2. \$	6,666	.68 \$		0.00

0.00

0.00

0.00

6,666.68

+\$

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

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	tor 1 tor 2	Shawn Jason Chavis Mary Elizabeth Chavis	-	Case	number (if known)		
				For	Debtor 1		Debtor 2 or -filing spouse
	Сор	y line 4 here	4.	\$_	6,666.68	\$	0.00
5.	List	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,388.25	\$	0.00
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$_	0.00
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00
	5e.	Insurance	5e.	\$	289.29	\$	0.00
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	0.00
	5g.	Union dues	5g.	\$_	0.00	\$	0.00
	5h.	Other deductions. Specify: Life Insurance	_ 5h.+			+ \$_	0.00
		LTD	_	\$_	12.61	\$_	0.00
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	1,746.55	\$	0.00
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	4,920.13	\$_	0.00
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00
	8b.	Interest and dividends	8b.	\$	0.00	\$_	0.00
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00
	8e.	Social Security	8e.	\$	0.00	\$	0.00
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	e 8f. 8g.	\$_ \$	0.00	\$_ \$	0.00
	8g. 8h.	Other monthly income. Specify:	8h.+	· · -	0.00		0.00 0.00
	OII.		_ 011.1	Ψ_	0.00	',Ψ_	0.00
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$_	0.00
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		4,920.13 + \$_		0.00 = \$ 4,920.13
11.	Incluothe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	deper		•	-	
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certalies					12. \$ 4,920.13
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?				Combined monthly income
		Yes. Explain:					

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Fill	in this informa	ation to identify yo	our case:					
Deb	otor 1	Shawn Jaso	n Chavis	;		Chec	ck if this is:	
						_	An amended filing	
	otor 2	Mary Elizabe	th Chavi	is				wing postpetition chapter the following date:
(Spo	ouse, if filing)						13 expenses as or	the following date.
Unit	ted States Bank	ruptcy Court for the:	NORTH	HERN DISTRICT OF ILLIN	OIS	-	MM / DD / YYYY	
Cas	e number							
(If k	nown)							
\bigcirc	fficial Fo	orm 106J				•		
			Evnor	3000				404
		J: Your		ises If two married people a	ro filing together b	ath are are	.allı vaquanaible f	12/1
info	ormation. If n		eded, atta	ach another sheet to this				
Par		ribe Your House	hold					
1.	Is this a joi							
	□ No. Go to		·	esta haveahaldû				
			ın a separ	rate household?				
	■ N		st file Offic	cial Form 106J-2, Expense	s for Separate Hous	ehold of Deb	otor 2.	
2.	Do you hav	ve dependents?	■ No					
	Do not list Dand Debtor		☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						Yes
								□ No
								□ Yes □ No
								☐ No☐ Yes
								□ No
								☐ Yes
3.		penses include	. •	l _{No}				
		of people other to d your depende		Yes				
		a your acpende						
Est exp	imate your e	a date after the	our bankr	lly Expenses uptcy filing date unless y y is filed. If this is a sup				
				government assistance				
	value of suc ficial Form 1		d have in	cluded it on Schedule I:	Your Income		Your exp	enses
4.		or home owners nd any rent for th		nses for your residence.	nclude first mortgag	je 4. \$	i	799.00
	If not inclu	ded in line 4:						
	4a. Real	estate taxes				4a. \$;	0.00
	4b. Prope	erty, homeowner's	s, or renter	r's insurance		4b. \$		15.00
			•	upkeep expenses		4c. \$		0.00
5		eowner's associat		idominium dues our residence , such as ho	mo oquity laana	4d. \$ 5. \$		0.00
	AUUHUOHAI	monuaue DavM	anna ior v	oor resoughter such as no	ine equity idans	ול כ	1	(1 (1))

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	Shawn Jason Chavis			
ebtor 2	Mary Elizabeth Chavis	Case num	ber (if known)	
. Utilitie	oc.			
	Electricity, heat, natural gas	6a.	\$	215.00
	Water, sewer, garbage collection	6b.		65.00
	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	251.00
6d.	Other. Specify:	6d.	\$	0.00
	and housekeeping supplies	7.	\$	600.00
	care and children's education costs	8.	\$	0.00
Clothi	ng, laundry, and dry cleaning	9.	\$	180.00
). Perso	nal care products and services	10.	\$	200.00
I. Medic	al and dental expenses	11.	\$	175.00
. Trans	portation. Include gas, maintenance, bus or train fare.			
	include car payments.	12.	*	350.00
	ainment, clubs, recreation, newspapers, magazines, and books	13.	· -	80.00
	able contributions and religious donations	14.	\$	0.00
i. Insura				
	include insurance deducted from your pay or included in lines 4 or 20.	15a.	c	0.00
	Life insurance Health insurance		*	0.00
	Health Insurance Vehicle insurance	15b. 15c.	·	0.00 115.00
		15d.	\$	
	Other insurance. Specify:	13u.	Φ	0.00
Specif	Do not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
	ment or lease payments:		Ψ	0.00
	Car payments for Vehicle 1	17a.	\$	277.00
	Car payments for Vehicle 2	17b.	·	0.00
	Other. Specify: Furniture Lease	17c.	\$	134.00
	Other. Specify: Husband's Student Loans	17d.	\$	537.14
	Wife's Student Loans		\$	101.19
. Your	payments of alimony, maintenance, and support that you did not report as	 S		
deduc	ted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		·	400.00
	payments you make to support others who do not live with you.		\$	0.00
Specif	·	19.		
	real property expenses not included in lines 4 or 5 of this form or on Sch			0.00
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20e.	· -	0.00
. Otner	Specify: Miscellaneous, Birthdays, Holidays, Haircuts	21.	+\$	150.00
. Calcu	ate your monthly expenses			
22a. A	dd lines 4 through 21.		\$	4,644.33
	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$,
	dd line 22a and 22b. The result is your monthly expenses.		\$	4,644.33
				.,
	late your monthly net income.		•	_
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	· -	4,920.13
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	4,644.33
22-	Cubtract value monthly averaged from value as a thin in a sec			
	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	275.80
	The result is your <i>monthly het income.</i>	200.	*	
4. Do yo	u expect an increase or decrease in your expenses within the year after yo	ou file this	s form?	
For exa	mple, do you expect to finish paying for your car loan within the year or do you expect your			or decrease because of a
	ation to the terms of your mortgage?			
■ No				
☐ Ye	Explain here:			

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Fill in this info	rmation to identify your	case:			
Debtor 1					
Deptor I	Shawn Jason Cha	Middle Name	Last Name		
Debtor 2	Mary Elizabeth Cl		2dot Hamo		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
You must file th	is form whenever you f	ile bankruptcy schedulen connection with a bar	es or amended sch		atement, concealing property, or 000, or imprisonment for up to 20
Sig	n Below				
Did you pa	ay or agree to pay some	one who is NOT an atto	orney to help you fi	II out bankruptcy forms?	
■ No					
☐ Yes.	Name of person			. Attach Bankruptcy Peti and Signature (Official F	ition Preparer's Notice, Declaration, Form 119).
	alty of perjury, I declare re true and correct.	that I have read the su	mmary and schedu	lles filed with this declarat	tion and
Y Icl Sh	own Jason Chavis		Y /c/ M	ary Elizaboth Chavis	

Mary Elizabeth Chavis

Date December 31, 2015

Signature of Debtor 2

Shawn Jason Chavis

Date December 31, 2015

Signature of Debtor 1

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Debtor 2	Shawn Jason Cha	avis		
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	Mary Elizabeth Cl First Name	havis Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT OF ILLI	NOIS	
Case number(if known)				☐ Check if this is an amended filing
Be as complete a	of Financial A	ole. If two married people are fili	s Filing for Bankruptcy	nsible for supplying correct
<u> </u>	n). Answer every quest Details About Your Mar	tion. ital Status and Where You Lived	I Before	
-	r current marital status	s?		
■ Married □ Not mar	ried			
2. During the la	act 2 voors, hove vou li			
During the k	ası ə years, nave you n	ived anywhere other than where	you live now?	
□ No	• . •	ved in the last 3 years. Do not inclu	•	
□ No ■ Yes. List	• . •	·	•	Dates Debtor 2 lived there
□ No ■ Yes. List Debtor 1 Pri	t all of the places you liv	ved in the last 3 years. Do not inclu Dates Debtor 1	ude where you live now.	
□ No ■ Yes. List Debtor 1 Pri 3774 Gnar	t all of the places you living the control of the places you living the control of the control o	Dates Debtor 1 lived there From-To:	ude where you live now. Debtor 2 Prior Address:	lived there Same as Debtor 1
□ No ■ Yes. List Debtor 1 Pri 3774 Gnart Cherry Val	t all of the places you living Address: I Tree Lane liey, IL 61016 PSS St. IL 60187	Dates Debtor 1 lived there From-To: 12/2014 - 11/2015 From-To:	Debtor 2 Prior Address: Same as Debtor 1	lived there ■ Same as Debtor 1 From-To: ■ Same as Debtor 1

Entered 12/31/15 17:31:13 Case 15-83204 Doc 1 Filed 12/31/15 Desc Main Document Page 57 of 84 **Shawn Jason Chavis** Debtor 1 Debtor 2 Mary Elizabeth Chavis Case number (if known) Part 2 **Explain the Sources of Your Income** Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions and Check all that apply. Check all that apply. (before deductions exclusions) and exclusions) From January 1 of current year until \$83.969.72 \$3,236,09 ■ Wages, commissions, ■ Wages, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For last calendar year: \$83,000.00 \$1.00 Wages, commissions, Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$83,000.00 \$1.00 Wages, commissions, Wages, commissions, (January 1 to December 31, 2013) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below.. (before deductions and Describe below (before deductions exclusions) and exclusions) List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you

paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

□ No.

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

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Shawn Jason Chavis Case number (if known) Debtor 2 Mary Elizabeth Chavis

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Santander Consumer 8585 N Stemmons Fwy Suite 1000 Dallas, TX 75247	Monthly	\$358.00	\$11,522.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
Gresty Auto Sales 2080 Harlem Road Loves Park, IL 61111	Biweekly	\$140.00	\$4,000.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
Majestic Lake Financial 635 East Hwy 20, K Upper Lake, CA 95485		\$700.00	\$1,250.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other Personal Loan
Within 1 year before you filed for bankrupt Insiders include your relatives; any general participations of which you are an officer, direct including one for a business you operate as a support and alimony. No	artners; relatives of any gen ctor, person in control, or o	neral partners; partn wner of 20% or more	erships of which your of their voting sec	ou are a general partner; curities; and any managing agent,
Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider		yments or transfer	any property on a	ccount of a debt that benefited
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
art 4: Identify Legal Actions, Repossession	ns, and Foreclosures			
Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.	tcy, were you a party in a			
Within 1 year before you filed for bankrupt List all such matters, including personal injury	tcy, were you a party in a			
Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.	tcy, were you a party in a		on suits, paternity	

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Deb	otor 2 Mary Elizabeth Chavis	Case numb	er (if known)	
10.	Within 1 year before you filed for bankr Check all that apply and fill in the details b	ruptcy, was any of your property repossessed, foreclos elow.	ed, garnished, attached	d, seized, or levied?
	□ No			
	Yes. Fill in the information below.			
	Creditor Name and Address	Describe the Property	Date	Value of the
	Oreattor Name and Address	bescribe the Property	Date	property
		Explain what happened		
	Americash Loans	Wage Garnishment	9/2015 -	\$1,846.16
	P.O. Box 184 Des Plaines, IL 60016	☐ Property was repossessed.	12/2015	
	200 : 1020, 12 000 10	☐ Property was foreclosed.		
		■ Property was garnished.		
		☐ Property was attached, seized or levied.		
11.	accounts or refuse to make a payment No Yes. Fill in the details.		institution, set on any	amounts from your
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
Par	■ No □ Yes t 5: List Certain Gifts and Contribution	ons		
13.	Within 2 years before you filed for bank	cruptcy, did you give any gifts with a total value of mor	e than \$600 per person	?
	■ No			
	Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$6 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift an	d		
	Address:			
14.	Within 2 years before you filed for bank ■ No	cruptcy, did you give any gifts or contributions with a t	otal value of more than	\$600 to any charity
	☐ Yes. Fill in the details for each gift or	contribution.		
	Gifts or contributions to charities that more than \$600	total Describe what you contributed	Dates you contributed	Value
	Charity's Name Address (Number, Street, City, State and ZIP Cor	de)		
Dav	t C. List Cartain Lagge			
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankr disaster, or gambling?	ruptcy or since you filed for bankruptcy, did you lose a	nything because of the	t, fire, other
	■ No			
	Yes. Fill in the details.			
	Describe the property you lost and	Describe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property.</i>	loss	lost

Shawn Jason Chavis

Debtor 1

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Debtor 1 Shawn Jason Chavis
Debtor 2 Mary Elizabeth Chavis

Case number (if known)

Pal	List Certain Payments or Transfers					
16.	Within 1 year before you filed for bankruptcy consulted about seeking bankruptcy or prepinclude any attorneys, bankruptcy petition prep	paring a bankruptcy pe	tition?			
	□ No					
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and transferred	value of any prope		e payment ransfer was de	Amount of payment
	Springer Law Firm 2222 E State St, Suite 107 Rockford, IL 61104	\$0, \$3,500 to be	e paid through th	ne plan.		\$0.00
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your credito Do not include any payment or transfer that you	rs or to make payment			nsfer any prop	erty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and transferred	value of any prope	•	e payment ransfer was de	Amount of payment
18.	Within 2 years before you filed for bankruptor transferred in the ordinary course of your but Include both outright transfers and transfers materially gifts and transfers that you have alread	usiness or financial aff ade as security (such as	airs? the granting of a se		-	
	■ No □ Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and property transfer		Describe any p payments recei paid in exchang	ved or debts	Date transfer was made
	Person's relationship to you			paid in exchang	Je	
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro		ny property to a se	lf-settled trust or	similar device	e of which you are a
	Yes. Fill in the details.					
	Name of trust	Description and	value of the proper	rty transferred		Date Transfer was made
Pai	t 8: List of Certain Financial Accounts, Ins	struments, Safe Depos	it Boxes, and Stora	age Units		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, associated in the cooperative of the cooperative	r other financial accou	ınts; certificates of	-		•
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	or Date acc closed, moved, transfer	or	Last balance before closing or transfer

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Debtor 1 Shawn Jason Chavis
Debtor 2 Mary Elizabeth Chavis

Case number (if known)

21.	Do you now have, or did you have within 1 year cash, or other valuables?	before you filed for bankruptcy, a	ny safe deposit box or other deposito	ory for securities,
	No			
	Yes. Fill in the details.			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	_	lace other than your home within 1	year before you filed for bankruptcy	
	■ No □ Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	rt 9: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that someofor someone.	one else owns? Include any proper	ty you borrowed from, are storing for	r, or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	rt 10: Give Details About Environmental Inform	ation		
For	the purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul Site means any location, facility, or property as to own, operate, or utilize it, including disposal	ir, land, soil, surface water, ground bstances, wastes, or material. defined under any environmental	dwater, or other medium, including s	tatutes or
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or	mental law defines as a hazardous	waste, hazardous substance, toxic	substance,
Rep	oort all notices, releases, and proceedings that yo	ou know about, regardless of wher	they occurred.	
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environm	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
		,		

Case 15-83204 Doc 1 Filed 12/31/15 Entered 12/31/15 17:31:13 Document Page 62 of 84 Debtor 1 **Shawn Jason Chavis** Mary Elizabeth Chavis Case number (if known) Debtor 2 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Shawn Jason Chavis /s/ Mary Elizabeth Chavis Shawn Jason Chavis Mary Elizabeth Chavis Signature of Debtor 1 Signature of Debtor 2 Date December 31, 2015 Date **December 31, 2015** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney

and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$3,500.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received , $\$\underline{0.00}$ toward the flat fee, leaving a balance due of $\$\underline{3,500.00}$; and $\$\underline{0.00}$ for expenses,

leaving a balance due for the filing fee of \$0.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: <u>December 31, 2015</u>	
Signed:	
/s/ Shawn Jason Chavis	/s/ Daniel A. Springer
Shawn Jason Chavis	Daniel A. Springer
	Attorney for the Debtor(s)
/s/ Mary Elizabeth Chavis	```
Mary Elizabeth Chavis	
Debtor(s)	
Do not sign this agreement if the amou	ints are blank.
-	Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In	Shawn Jason Chavis Tre Mary Elizabeth Chavis		Case No.				
	mary Enzapolii Onavio	Debtor(s)	Chapter	13			
	DISCLOSURE OF COMPENS	SATION OF ATTO	RNEY FOR DE	CBTOR(S)			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	3,500.00			
	Prior to the filing of this statement I have received		\$	0.00			
	Balance Due			3,500.00			
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.						
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				law firm. A		
5.	In return for the above-disclosed fee, I have agreed to rend	ase, including:					
	a. Analysis of the debtor's financial situation, and renderingb. Preparation and filing of any petition, schedules, statemc. Representation of the debtor at the meeting of creditors	nent of affairs and plan which	n may be required;	-	kruptcy;		
	 d. [Other provisions as needed] Negotiations with secured creditors to recreaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on house 	s as needed; preparatior					
6.	By agreement with the debtor(s), the above-disclosed fee d Representation of the debtors in any discl any other adversary proceeding.	oes not include the following hargeability actions, jud	g service: icial lien avoidanc	es, relief from sta	ay actions or		
		CERTIFICATION					
thi	I certify that the foregoing is a complete statement of any a is bankruptcy proceeding.	greement or arrangement for	payment to me for re	epresentation of the	debtor(s) in		
	December 31, 2015	/s/ Daniel A. Spri					
	Date	Daniel A. Springer Signature of Attorne					
		Springer Law Fir					
		2222 E State St Suite 107					
		Rockford, IL 611	04				
		815.312.4725 dspringerlaw@g	mail com				
		Name of law firm	mali.com				

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney

and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$3,500.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received , $\$\underline{0.00}$

toward the flat fee, leaving a balance due of \$3,500.00; and \$0.00 for expenses,

leaving a balance due for the filing fee of \$0.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: __December 19, 2015

Signed:

Shawn Jacon Chavio

Daniel A. Springer

Attorney for the Debtor(s)

Mary Elizabeth Chavis

Debtor(s)

Do not sign this agreement if the amounts are blank.

Local Bankruptcy Form 23c

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United States Bankruptcy Court Northern District of Illinois

In re	Shawn Jason Chavis Mary Elizabeth Chavis		Case No.	
		Debtor(s)	Chapter	13
	VER	VERIFICATION OF CREDITOR MATRIX Number of Creditors:		
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.			
Date:	December 31, 2015	/s/ Shawn Jason Chavis		
		Shawn Jason Chavis Signature of Debtor		
Date:	December 31, 2015	/s/ Mary Elizabeth Chavis		
		Mary Elizabeth Chavis		
		Signature of Debtor		

AL Dept. of Human Resources 50 Ripley Street Montgomery, AL 36130

American Coradius International 2420 Sweethome Rd. #150 Buffalo, NY 14228-2244

Americash Loans P.O. Box 184 Des Plaines, IL 60016

Aspen Dental 7310 Walton Street Rockford, IL 61108

Association of Univ. Radiologists 5401 Kingston Pike, Suite 540 Knoxville, TN 37919

ATG Credit LLC Attn: Bankruptcy Dept. PO Box 14895 Chicago, IL 60614

Athens Limestone Hospital 700 Market Street West Athens, AL 35611

BBY/CBNA PO Box 6497 Sioux Falls, SD 57117

Best Choice 123 621 Medicine Way, Suite 6 Ukiah, CA 95482

Capio Partners 2222 Texoma Parkway 150 Sherman, TX 75091

Capital One Auto Finance Attn: Bankruptcy Dept. PO Box 259407 Plano, TX 75025 Capital One Bank (USA), N.A. Attn: Bankruptcy Dept PO Box 6492 Carol Stream, IL 60197

Capital One Bank USA NA Attn: Bankruptcy Dept. PO Box 30281 Salt Lake City, UT 84130

Citizens Finance Attn: Bankruptcy Dept. 6457 N 2nd St Loves Park, IL 61111

Comcast Attn: Bankruptcy Dept. PO Box 3005 Southeastern, PA 19398

Comenity Bank Attn: Bankruptcy Dept. PO Box 182789 Columbus, OH 43218

Commonwealth Edison 3 Lincoln Center Attn: Bankruptcy Group/Claims Dept. Villa Park, IL 60181

Credit Collection Services Attn: Bankruptcy Dept. PO Box 9134 Needham Heights, MA 02494

Direct Loan SVC System Attn: Bankruptcy Dept. PO Box 5609 Greenville, TX 75403

Equifax PO Box 740256 Atlanta, GA 30374 Experian PO Box 4500 Allen, TX 75013

Federal Loan Servicing Credit Attn: Bankruptcy Dept. PO Box 60610 Harrisburg, PA 17106

Fox Collection Center 454 Moss Trail Goodlettsville, TN 37072

Fox Valley Credit Union 575 North Broadway Aurora, IL 60505

Ft. Sanders Regional Medical Center 1901 Clinch Avenue Knoxville, TN 37916

Gateway at Knoxville 301 Lippencott St. Knoxville, TN 37920

GEICO Attn: Bankruptcy Dept. PO Box 9105 Macon, GA 31208-9105

Georgia Department of Revenue 1800 Century Boulevard NE Atlanta, GA 30345

Gresty Auto Sales 2080 Harlem Road Loves Park, IL 61111

Harvard Collection Services Inc. 4839 N. Elston Avenue Chicago, IL 60630

Heritage Family Medicine 12205 County Line Road, Suite B Madison, AL 35758 HF Holdings 5929 Anno Avenue Orlando, FL 32809

Jay K. Levy & Associates 155 Revere Drive #2 Northbrook, IL 60062

Jostens Inc. 3601 Minnesota Drive, Suite 400 Minneapolis, MN 55435

Kay Jewelers Attn: Bankruptcy Dept. 375 Ghent Rd Akron, OH 44333

Knoxville Utilities Board 445 S Gay St.
Knoxville, TN 37902

Lion Loans P.O. Box 276 Isabel, SD 57633

Lourn Long 811 Castleview Circle Jasper, TN 37347

Majestic Lake Financial 635 East Hwy 20, K Upper Lake, CA 95485

Navient PO Box 9635 Wilkes Barre, PA 18773

One Advantage LLC 1232 West State Road La Porte, IN 46350

OSF St. Anthony Med Center Attn: Bankruptcy Dept. 5510 East State St. Rockford, IL 61108-2381 Penn Credit Corporation 916 S. 14th Street Harrisburg, PA 17104

Physicians Care PC 4490 Hixson Pike Chattanooga, TN 37415

Progressive Insurance 6300 Wilson Mills Road Cleveland, OH 44143

Progressive Leasing 10619 South Jordan Gateway, Ste 100 South Jordan, UT 84095

Radiology of Huntsville PC 2006 Franklin Street SE, Suite 200 Huntsville, AL 35801

Revenue Recovery Corporation PO Box 50250 Knoxville, TN 37950

Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108

Santander Consumer 8585 N Stemmons Fwy Suite 1000 Dallas, TX 75247

Southeast Oral Surgery 1858 Crest Road Maryville, TN 37804

Spot Loan PO Box 927 Palatine, IL 60078

Stellar Recovery, Inc. Attn: Bankruptcy Dept. 1327 Highway 2 W, Suite 100 Kalispell, MT 59901 Target Finance LLC PO Box 581 Hays, MT 59527

Tek Collecting Inc. PO Box 1269 Columbus, OH 43216

The Rush
Attn: Bankruptcy Dept.
3001 Knoxville Ctr Dr.
Knoxville, TN 37924

Thomas Pearson 747 Halifax Ave. Winter Park, FL 32792

TransUnion 555 West Adams Street Chicago, IL 60661

US Dept. of Education/AFSA PO Box 7202 Utica, NY 13504

UT Medical Center 1924 Alcoa Highway Knoxville, TN 37920

West Market Emergency Group 700 West Market Street Athens, AL 35611

Wheaton 121 121 N. Cross Street Wheaton, IL 60187

Winfield Radiology Consultants 25 N. Winfield Road Winfield, IL 60190